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**** CONTINUING DATA *********** FOREIGN APPLICATIONS *******

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY INDIA	SHEETS DRAWING 0	TOTAL CLAIMS 64	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Renee Claryo</i> <i>RC</i> Allowance Examiner's Signature Initials				

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TITLE

Pharmaceutical formulation containing muscle relaxant and COX-II inhibitor

FILING FEE RECEIVED 1692	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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